



BUREAU OF TAXATION  
INCOME TAX DIVISION  
STATE OFFICE BUILDING  
P.O. BOX 1062  
AUGUSTA, MAINE 04332-1062

# MAINE CORPORATE INCOME TAX

Schedule CB must be accompanied by a legible copy of the parent's Federal Consolidated Tax Return pages 1, 2, 3 and 4 (or equivalent). If any member(s) of the groups is a DISC, FSC or Possession Corporation, see General Instructions, page 2, paragraph 10.

**This Schedule must be attached to your Form 1120-ME.**

**SCHEDULE CB**  
Page 1  
**FORM 1120-ME**

Line No.	* Corporation Name and Operating Address (City and State)	Column 2 Federal Identification Number	Column 3 Does this corporation have Nexus with Maine?		Column 4 Corporation's Product or Service	Column 5 Check (✓) Appropriate Column				Column 6 Federal Taxable Income
			Yes	No		(a)	(b)	(c)	(d)	
1.										
2.										
3.										
4.										
5.										
6.										
7.										
8.										
9.										
10.										
11.										
12.										
<b>13. Federal Taxable Income of Unitary Members</b> \$										
<b>14. Subtract: 80-20 Corporations Federal Taxable Income</b> \$										
<b>15. Add: Expenses incurred on behalf of 80-20 corporations and affiliates that are not members of unitary group</b> \$										
<b>16. Total Federal Taxable Income for the Unitary Business</b> \$										
<b>17. Federal Consolidated Taxable Income shown on Line 30, Page 1, federal Form 1120</b> \$										

\*Please indicate if DISC, FSC or Possession Corporation

Column 5 (a) - Unitary Member of Federal Consolidated Group  
Column 5 (b) - Non-Unitary Member of Federal Consolidated Group

Column 5 (c) - Non-Consolidated Unitary Member, Greater than 50% Ownership  
Column 5 (d) - Non-Consolidated Non-Unitary Member, Greater than 50% Ownership



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This section of Schedule CB must be completed by those corporations who are filing a single combined report for all members of a unitary group. See instructions on the reverse side of Schedule CB, page 1.

This Schedule must be attached to your Form 1120-ME.

**SCHEDULE CB**  
Page 2  
**FORM 1120-ME**

Line Number	Column 7 State Modifications		Column 8		Column 9		Column 10	
	A. Subtractions	B. Additions	A. Sales in Maine	B. Sales Everywhere	A. Payroll in Maine	B. Payroll Everywhere	A. Property in Maine	B. Property Everywhere
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								
11.								
12.								
13. TOTALS								